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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET					Application Number 10/580,123			Filing Date 19 May, 2006			☐ To be Mailed		
	Substitute	e for Form I	PTO-1360		Applicant(s) NISHI, KENJI						Page 1 of 1		
					* May be used for additional claims or amendn						ents		
CLAIMS	AS FILED 06/09/2010		AFTER FIRST AMENDMENT		AFTER SEC. AMENDMENT		*		*		*		
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
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2		1					52						
3	1						53						
4 5		- 1					54 55						
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46							96						
47							97						
48							98 99						
49 50							100						
Total	2						Total						
Indep Total		48					Indep Total						
Depend							Depend						
Total Claims	50						Total Claims						

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